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20995 7	590 09/08	/2006	nav	have its own certificate of mailing or transmission.		
KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/081,028	02/21/2002		Farhad Farassat		MEISS68.001AUS	1645
TITLE OF INVENTION: N	MECHANISM FOR EX	XCHANGING CHIP-CA	RRIER PLATES FOR U	SE IN A HYBRID CH	IIP-BONDING MACHIN	ME .
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/08/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
KRAMER, DEAN J		3652	414-403000	•		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2			
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	s an assignee is identi n 37 CFR 3.11. Comp IEE LVOTEC Bondte	fied below, no assignee letion of this form is NO echnick GmbH	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY Ottobrunn,	atent. If an assignee assignment. Y and STATE OR COU	JNTRY)	ocument has been filed for
Since Fee Sinc			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims S NOTE: The Issue Fee and P	MALL ENTITY states	See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ed from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in k Office.			
Authorized Signature			Office. Date			
Typed or printed name _	Michael H.	Trenholm	Registration No37,743			
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